

AP - 16

STAGE 1 & 2 REPORTS

DATE:

7-9-10



RECEIVED OCD
2010 JUL 15 PM 1:53

July 9, 2010

Mr. Ed Hansen
New Mexico Energy, Minerals and Natural Resources
Oil Conservation Division
1220 South St. Francis Drive
Santa Fe, NM 87505

Re: Notification of Plains Marketing, L.P. Plugging and Abandonment of Monitor Wells
Plains Bob Durham
NMOCD Reference Number AP-0016
NW ¼, NE ¼, Section 32, T-19-S, R-37-E
Lea County, NM

Dear Mr. Hansen,

NOVA Safety and Environmental (NOVA), on behalf of Plains Marketing, L.P. (Plains) respectfully submits the following notification of plugging and abandonment of monitor wells at the Plains Bob Durham leak site, located in the NW ¼, NE ¼, Section 32, T-19-S, R-37-E in Lea County, NM.

On May 29, 2010, four (4) monitor wells, MW-9, MW-14, MW-26 and MW-29, were plugged and abandoned at the Plains Bob Durham site. Please reference your letter to Mr. Jason Henry of Plains Marketing L.P. dated May 10, 2010 regarding authorization to plug and abandon these wells.

The monitor wells were plugged and abandoned by Straub Corporation, Inc (Straub) of Stanton, Texas, a licensed water well driller in the State of New Mexico. The monitor wells were plugged utilizing guidelines set forth by the office of the New Mexico State Engineer. Straub removed and disposed of the monitor well cover, vault, and the remains of the concrete pad.

Monitor wells MW-9, MW-14, MW-26 and MW-29 were each filled with approximately 3 bags of bentonite hole plug to a depth of approximately two (2) feet bgs and properly hydrated with water. Concrete was placed from approximately two (2) feet bgs to the surface and hydrated with water. Topsoil was placed above the former monitor well to complete the procedure.

The former monitor well locations are as follows:

- MW-9, 32 degrees, 37.412" N, 103 degrees, 16.8/63" W
- MW-14, 32 degrees, 37.401" N, 103 degrees, 16.923" W
- MW-26, 32 degrees, 37.412" N, 103 degrees, 16.811" W
- MW-29, 32 degrees, 38.131" N, 103 degrees, 16.999" W

Plains has completed the approved plugging and abandonment of the above referenced monitor wells as directed by the New Mexico Oil Conservation Division (NMOCD). Plains will continue to gauge and sample the remaining monitor wells at the site.

In the future, Plains may make addition requests to the NMOCD for plugging and abandonment of monitor well(s) at this site, if warranted.

Sincerely,



Ronald K. Rounsaville
Senior Project Manager
NOVA Safety and Environmental

cc:

Larry Johnson, NMOCD, Hobbs, NM
Jason Henry, Plains Marketing, L.P., Denver City, TX
jhenry@paalp.com
Jeff Dann, Plains Marketing, L.P., Houston, TX
jpdann@paalp.com
NOVA Safety and Environmental, Midland, TX
rrounsaville@novatraining.cc

Attachments:

Attachment #1 – State of New Mexico Well Record & Log – Plugging Reports



WELL RECORD & LOG

OFFICE OF THE STATE ENGINEER

www.ose.state.nm.us

1. GENERAL AND WELL LOCATION	POD NUMBER (WELL NUMBER) BOB DURHAM MW -9				OSE FILE NUMBER(S)			
	WELL OWNER NAME(S) PLAINS MARKETING LP				PHONE (OPTIONAL)			
	WELL OWNER MAILING ADDRESS 333 CLAY STREET, SUITE 1600				CITY HOUSTON		STATE TX	ZIP 77078
	WELL LOCATION (FROM GPS)	DEGREES LATITUDE	MINUTES 37	SECONDS 25.00 N	* ACCURACY REQUIRED: ONE TENTH OF A SECOND * DATUM REQUIRED: WGS 84			
		LONGITUDE	103	16				
DESCRIPTION RELATING WELL LOCATION TO STREET ADDRESS AND COMMON LANDMARKS GO MONUMENT CAFE GO W 9THS OF MI TAKE L INTO SITE.								
2. OPTIONAL	(2.5 ACRE) $\frac{1}{4}$	(10 ACRE) $\frac{1}{4}$	(40 ACRE) $\frac{1}{4}$	(160 ACRE) $\frac{1}{4}$	SECTION	TOWNSHIP <input type="checkbox"/> NORTH <input type="checkbox"/> SOUTH	RANGE <input type="checkbox"/> EAST <input type="checkbox"/> WEST	
	SUBDIVISION NAME				LOT NUMBER	BLOCK NUMBER	UNIT/TRACT	
	HYDROGRAPHIC SURVEY					MAP NUMBER	TRACT NUMBER	
3. DRILLING INFORMATION	LICENSE NUMBER WD1478		NAME OF LICENSED DRILLER EDWARD BRYAN			NAME OF WELL DRILLING COMPANY STRAUB CORPORATION		
	DRILLING STARTED 5-28-10		DRILLING ENDED 5-28-10		DEPTH OF COMPLETED WELL (FT) 22	BORE HOLE DEPTH (FT) 22	DEPTH WATER FIRST ENCOUNTERED (FT)	
	COMPLETED WELL IS: <input type="checkbox"/> ARTESIAN <input type="checkbox"/> DRY HOLE <input type="checkbox"/> SHALLOW (UNCONFINED)						STATIC WATER LEVEL IN COMPLETED WELL (FT)	
	DRILLING FLUID: <input type="checkbox"/> AIR <input type="checkbox"/> MUD <input type="checkbox"/> ADDITIVES - SPECIFY:							
	DRILLING METHOD: <input type="checkbox"/> ROTARY <input type="checkbox"/> HAMMER <input type="checkbox"/> CABLE TOOL <input type="checkbox"/> OTHER - SPECIFY:							
	DEPTH (FT) FROM TO		BORE HOLE DIA. (IN)	CASING MATERIAL	CONNECTION TYPE (CASING)	INSIDE DIA. CASING (IN)	CASING WALL THICKNESS (IN)	SLOT SIZE (IN)
4. WATER BEARING STRATA	DEPTH (FT) FROM TO		THICKNESS (FT)	FORMATION DESCRIPTION OF PRINCIPAL WATER-BEARING STRATA (INCLUDE WATER-BEARING CAVITIES OR FRACTURE ZONES)			YIELD (GPM)	
METHOD USED TO ESTIMATE YIELD OF WATER-BEARING STRATA						TOTAL ESTIMATED WELL YIELD (GPM)		

FOR OSE INTERNAL USE

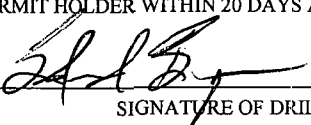
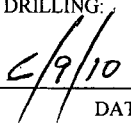
WELL RECORD & LOG (Version 6/9/08)

FILE NUMBER	POD NUMBER	TRN NUMBER
LOCATION		PAGE 1 OF 2

5. SEAL AND PUMP	TYPE OF PUMP: <input type="checkbox"/> SUBMERSIBLE <input type="checkbox"/> JET <input type="checkbox"/> NO PUMP – WELL NOT EQUIPPED <input type="checkbox"/> TURBINE <input type="checkbox"/> CYLINDER <input type="checkbox"/> OTHER – SPECIFY:						
	ANNULAR SEAL AND GRAVEL PACK	DEPTH (FT)		BORE HOLE DIA. (IN)	MATERIAL TYPE AND SIZE	AMOUNT (CUBIC FT)	METHOD OF PLACEMENT
		FROM	TO				
		2	22	2	.75 BAGS OF 3/8 HOLEPLUG		TOPLOAD
		0	2	2	.25 BAG OF CEMENT		TOPLOAD

6. GEOLOGIC LOG OF WELL	DEPTH (FT)		THICKNESS (FT)	COLOR AND TYPE OF MATERIAL ENCOUNTERED (INCLUDE WATER-BEARING CAVITIES OR FRACTURE ZONES)	WATER BEARING?		
	FROM	TO			<input type="checkbox"/> YES	<input type="checkbox"/> NO	
						<input type="checkbox"/> YES	<input type="checkbox"/> NO
						<input type="checkbox"/> YES	<input type="checkbox"/> NO
						<input type="checkbox"/> YES	<input type="checkbox"/> NO
						<input type="checkbox"/> YES	<input type="checkbox"/> NO
						<input type="checkbox"/> YES	<input type="checkbox"/> NO
						<input type="checkbox"/> YES	<input type="checkbox"/> NO
						<input type="checkbox"/> YES	<input type="checkbox"/> NO
						<input type="checkbox"/> YES	<input type="checkbox"/> NO
						<input type="checkbox"/> YES	<input type="checkbox"/> NO
						<input type="checkbox"/> YES	<input type="checkbox"/> NO
						<input type="checkbox"/> YES	<input type="checkbox"/> NO
						<input type="checkbox"/> YES	<input type="checkbox"/> NO
	ATTACH ADDITIONAL PAGES AS NEEDED TO FULLY DESCRIBE THE GEOLOGIC LOG OF THE WELL						

7. TEST & ADDITIONAL INFO	WELL TEST	METHOD: <input type="checkbox"/> BAILER <input type="checkbox"/> PUMP <input type="checkbox"/> AIR LIFT <input type="checkbox"/> OTHER – SPECIFY:
		TEST RESULTS - ATTACH A COPY OF DATA COLLECTED DURING WELL TESTING, INCLUDING START TIME, END TIME, AND A TABLE SHOWING DISCHARGE AND DRAWDOWN OVER THE TESTING PERIOD.
	ADDITIONAL STATEMENTS OR EXPLANATIONS: PLUGGING REPORT ALL CASING LEFT IN HOLE.	

8. SIGNATURE	THE UNDERSIGNED HEREBY CERTIFIES THAT, TO THE BEST OF HIS OR HER KNOWLEDGE AND BELIEF, THE FOREGOING IS A TRUE AND CORRECT RECORD OF THE ABOVE DESCRIBED HOLE AND THAT HE OR SHE WILL FILE THIS WELL RECORD WITH THE STATE ENGINEER AND THE PERMIT HOLDER WITHIN 20 DAYS AFTER COMPLETION OF WELL DRILLING:	
	 _____ SIGNATURE OF DRILLER	 _____ DATE

FOR OSE INTERNAL USE

WELL RECORD & LOG (Version 6/9/08)

FILE NUMBER	*POD NUMBER	TRN NUMBER
LOCATION	PAGE 2 OF 2	



WELL RECORD & LOG

OFFICE OF THE STATE ENGINEER

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1. GENERAL AND WELL LOCATION	POD NUMBER (WELL NUMBER) BOB DURHAM MW -14				OSE FILE NUMBER(S)							
	WELL OWNER NAME(S) PLAINS MARKETING LP				PHONE (OPTIONAL)							
	WELL OWNER MAILING ADDRESS 333 CLAY STREET, SUITE 1600				CITY HOUSTON		STATE TX		ZIP 77078			
	WELL LOCATION (FROM GPS)	DEGREES		MINUTES	SECONDS	* ACCURACY REQUIRED: ONE TENTH OF A SECOND * DATUM REQUIRED: WGS 84						
		LATITUDE		32	37							24.00
	LONGITUDE		103	16	55.00	W						
DESCRIPTION RELATING WELL LOCATION TO STREET ADDRESS AND COMMON LANDMARKS GO MONUMENT CAFE GO W 9THS OF MI TAKE L INTO SITE.												
2. OPTIONAL	(2.5 ACRE) 1/4	(10 ACRE) 1/4	(40 ACRE) 1/4	(160 ACRE) 1/4	SECTION	TOWNSHIP <input type="checkbox"/> NORTH <input type="checkbox"/> SOUTH	RANGE <input type="checkbox"/> EAST <input type="checkbox"/> WEST					
	SUBDIVISION NAME				LOT NUMBER	BLOCK NUMBER	UNIT/TRACT					
	HYDROGRAPHIC SURVEY					MAP NUMBER	TRACT NUMBER					
3. DRILLING INFORMATION	LICENSE NUMBER WD1478		NAME OF LICENSED DRILLER EDWARD BRYAN				NAME OF WELL DRILLING COMPANY STRAUB CORPORATION					
	DRILLING STARTED 5-28-10		DRILLING ENDED 5-28-10		DEPTH OF COMPLETED WELL (FT) 21		BORE HOLE DEPTH (FT) 21		DEPTH WATER FIRST ENCOUNTERED (FT)			
	COMPLETED WELL IS: <input type="checkbox"/> ARTESIAN <input type="checkbox"/> DRY HOLE <input type="checkbox"/> SHALLOW (UNCONFINED)						STATIC WATER LEVEL IN COMPLETED WELL (FT)					
	DRILLING FLUID: <input type="checkbox"/> AIR <input type="checkbox"/> MUD <input type="checkbox"/> ADDITIVES -- SPECIFY:											
	DRILLING METHOD: <input type="checkbox"/> ROTARY <input type="checkbox"/> HAMMER <input type="checkbox"/> CABLE TOOL <input type="checkbox"/> OTHER -- SPECIFY:											
	DEPTH (FT)		BORE HOLE DIA. (IN)	CASING MATERIAL	CONNECTION TYPE (CASING)	INSIDE DIA. CASING (IN)	CASING WALL THICKNESS (IN)	SLOT SIZE (IN)				
	FROM	TO										
4. WATER BEARING STRATA	DEPTH (FT)		THICKNESS (FT)	FORMATION DESCRIPTION OF PRINCIPAL WATER-BEARING STRATA (INCLUDE WATER-BEARING CAVITIES OR FRACTURE ZONES)				YIELD (GPM)				
	FROM	TO										
METHOD USED TO ESTIMATE YIELD OF WATER-BEARING STRATA							TOTAL ESTIMATED WELL YIELD (GPM)					

FOR OSE INTERNAL USE

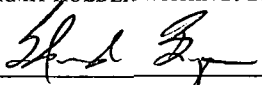
WELL RECORD & LOG (Version 6/9/08)

FILE NUMBER	POD NUMBER	TRN NUMBER
LOCATION	PAGE 1 OF 2	

5. SEAL AND PUMP	TYPE OF PUMP: <input type="checkbox"/> SUBMERSIBLE <input type="checkbox"/> JET <input type="checkbox"/> NO PUMP – WELL NOT EQUIPPED <input type="checkbox"/> TURBINE <input type="checkbox"/> CYLINDER <input type="checkbox"/> OTHER – SPECIFY:						
	ANNULAR SEAL AND GRAVEL PACK	DEPTH (FT)		BORE HOLE DIA. (IN)	MATERIAL TYPE AND SIZE	AMOUNT (CUBIC FT)	METHOD OF PLACEMENT
		FROM	TO				
		2	21	2	1.25 BAGS OF 3/8 HOLEPLUG		TOPLoad
		0	2	2	.5 BAG OF CEMENT		TOPLoad

6. GEOLOGIC LOG OF WELL	DEPTH (FT)		THICKNESS (FT)	COLOR AND TYPE OF MATERIAL ENCOUNTERED (INCLUDE WATER-BEARING CAVITIES OR FRACTURE ZONES)	WATER BEARING?	
	FROM	TO				
					<input type="checkbox"/> YES <input type="checkbox"/> NO	
					<input type="checkbox"/> YES <input type="checkbox"/> NO	
					<input type="checkbox"/> YES <input type="checkbox"/> NO	
					<input type="checkbox"/> YES <input type="checkbox"/> NO	
					<input type="checkbox"/> YES <input type="checkbox"/> NO	
					<input type="checkbox"/> YES <input type="checkbox"/> NO	
					<input type="checkbox"/> YES <input type="checkbox"/> NO	
					<input type="checkbox"/> YES <input type="checkbox"/> NO	
					<input type="checkbox"/> YES <input type="checkbox"/> NO	
					<input type="checkbox"/> YES <input type="checkbox"/> NO	
					<input type="checkbox"/> YES <input type="checkbox"/> NO	
					<input type="checkbox"/> YES <input type="checkbox"/> NO	
					<input type="checkbox"/> YES <input type="checkbox"/> NO	
	ATTACH ADDITIONAL PAGES AS NEEDED TO FULLY DESCRIBE THE GEOLOGIC LOG OF THE WELL					

7. TEST & ADDITIONAL INFO	WELL TEST	METHOD: <input type="checkbox"/> BAILER <input type="checkbox"/> PUMP <input type="checkbox"/> AIR LIFT <input type="checkbox"/> OTHER – SPECIFY:
	TEST RESULTS - ATTACH A COPY OF DATA COLLECTED DURING WELL TESTING, INCLUDING START TIME, END TIME, AND A TABLE SHOWING DISCHARGE AND DRAWDOWN OVER THE TESTING PERIOD.	
	ADDITIONAL STATEMENTS OR EXPLANATIONS: PLUGGING REPORT ALL CASING LEFT IN HOLE.	

8. SIGNATURE	THE UNDERSIGNED HEREBY CERTIFIES THAT, TO THE BEST OF HIS OR HER KNOWLEDGE AND BELIEF, THE FOREGOING IS A TRUE AND CORRECT RECORD OF THE ABOVE DESCRIBED HOLE AND THAT HE OR SHE WILL FILE THIS WELL RECORD WITH THE STATE ENGINEER AND THE PERMIT HOLDER WITHIN 20 DAYS AFTER COMPLETION OF WELL DRILLING:	
	 _____ SIGNATURE OF DRILLER	4/9/10 _____ DATE

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WELL RECORD & LOG (Version 6/9/08)

FILE NUMBER	POD NUMBER	TRN NUMBER
LOCATION		PAGE 2 OF 2



WELL RECORD & LOG

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1. GENERAL AND WELL LOCATION	POD NUMBER (WELL NUMBER) BOB DURHAM MW -26				OSE FILE NUMBER(S)					
	WELL OWNER NAME(S) PLAINS MARKETING LP				PHONE (OPTIONAL)					
	WELL OWNER MAILING ADDRESS 333 CLAY STREET, SUITE 1600				CITY HOUSTON		STATE TX		ZIP 77078	
	WELL LOCATION (FROM GPS)		DEGREES LATITUDE 32		MINUTES 37		SECONDS 32.00 N		* ACCURACY REQUIRED: ONE TENTH OF A SECOND	
		LONGITUDE 103		16		58.00 W		* DATUM REQUIRED: WGS 84		
DESCRIPTION RELATING WELL LOCATION TO STREET ADDRESS AND COMMON LANDMARKS GO MONUMENT CAFE GO W 9THS OF MI TAKE L INTO SITE.										
2. OPTIONAL	(2.5 ACRE) 1/4		(10 ACRE) 1/4		(40 ACRE) 1/4		(160 ACRE) 1/4		SECTION	
	SUBDIVISION NAME				LOT NUMBER		BLOCK NUMBER		UNIT/TRACT	
	HYDROGRAPHIC SURVEY				MAP NUMBER				TRACT NUMBER	
3. DRILLING INFORMATION	LICENSE NUMBER WD1478		NAME OF LICENSED DRILLER EDWARD BRYAN				NAME OF WELL DRILLING COMPANY STRAUB CORPORATION			
	DRILLING STARTED 5-28-10		DRILLING ENDED 5-28-10		DEPTH OF COMPLETED WELL (FT) 29		BORE HOLE DEPTH (FT) 29		DEPTH WATER FIRST ENCOUNTERED (FT)	
	COMPLETED WELL IS: <input type="checkbox"/> ARTESIAN <input type="checkbox"/> DRY HOLE <input type="checkbox"/> SHALLOW (UNCONFINED)				STATIC WATER LEVEL IN COMPLETED WELL (FT)					
	DRILLING FLUID: <input type="checkbox"/> AIR <input type="checkbox"/> MUD <input type="checkbox"/> ADDITIVES - SPECIFY:									
	DRILLING METHOD: <input type="checkbox"/> ROTARY <input type="checkbox"/> HAMMER <input type="checkbox"/> CABLE TOOL <input type="checkbox"/> OTHER - SPECIFY:									
	DEPTH (FT) FROM TO		BORE HOLE DIA. (IN)		CASING MATERIAL		CONNECTION TYPE (CASING)		INSIDE DIA. CASING (IN)	
4. WATER BEARING STRATA	DEPTH (FT) FROM TO		THICKNESS (FT)		FORMATION DESCRIPTION OF PRINCIPAL WATER-BEARING STRATA (INCLUDE WATER-BEARING CAVITIES OR FRACTURE ZONES)				YIELD (GPM)	
METHOD USED TO ESTIMATE YIELD OF WATER-BEARING STRATA							TOTAL ESTIMATED WELL YIELD (GPM)			

FOR OSE INTERNAL USE

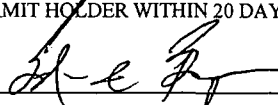
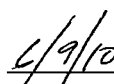
WELL RECORD & LOG (Version 6/9/08)

FILE NUMBER	POD NUMBER	TRN NUMBER
LOCATION	PAGE 1 OF 2	

5. SEAL AND PUMP	TYPE OF PUMP: <input type="checkbox"/> SUBMERSIBLE <input type="checkbox"/> JET <input type="checkbox"/> NO PUMP – WELL NOT EQUIPPED <input type="checkbox"/> TURBINE <input type="checkbox"/> CYLINDER <input type="checkbox"/> OTHER – SPECIFY:						
	ANNULAR SEAL AND GRAVEL PACK	DEPTH (FT)		BORE HOLE DIA. (IN)	MATERIAL TYPE AND SIZE	AMOUNT (CUBIC FT)	METHOD OF PLACEMENT
		FROM	TO				
		2	29	2	.75 BAGS OF 3/8 HOLEPLUG		TOPLOAD
		0	2	2	.5 BAG OF CEMENT		TOPLOAD

6. GEOLOGIC LOG OF WELL	DEPTH (FT)		THICKNESS (FT)	COLOR AND TYPE OF MATERIAL ENCOUNTERED (INCLUDE WATER-BEARING CAVITIES OR FRACTURE ZONES)	WATER BEARING?	
	FROM	TO				
						<input type="checkbox"/> YES <input type="checkbox"/> NO
						<input type="checkbox"/> YES <input type="checkbox"/> NO
						<input type="checkbox"/> YES <input type="checkbox"/> NO
						<input type="checkbox"/> YES <input type="checkbox"/> NO
						<input type="checkbox"/> YES <input type="checkbox"/> NO
						<input type="checkbox"/> YES <input type="checkbox"/> NO
						<input type="checkbox"/> YES <input type="checkbox"/> NO
						<input type="checkbox"/> YES <input type="checkbox"/> NO
						<input type="checkbox"/> YES <input type="checkbox"/> NO
						<input type="checkbox"/> YES <input type="checkbox"/> NO
						<input type="checkbox"/> YES <input type="checkbox"/> NO
						<input type="checkbox"/> YES <input type="checkbox"/> NO
	ATTACH ADDITIONAL PAGES AS NEEDED TO FULLY DESCRIBE THE GEOLOGIC LOG OF THE WELL					

7. TEST & ADDITIONAL INFO	WELL TEST	METHOD: <input type="checkbox"/> BAILER <input type="checkbox"/> PUMP <input type="checkbox"/> AIR LIFT <input type="checkbox"/> OTHER – SPECIFY:				
		TEST RESULTS - ATTACH A COPY OF DATA COLLECTED DURING WELL TESTING, INCLUDING START TIME, END TIME, AND A TABLE SHOWING DISCHARGE AND DRAWDOWN OVER THE TESTING PERIOD.				
	ADDITIONAL STATEMENTS OR EXPLANATIONS: PLUGGING REPORT ALL CASING LEFT IN HOLE.					

8. SIGNATURE	THE UNDERSIGNED HEREBY CERTIFIES THAT, TO THE BEST OF HIS OR HER KNOWLEDGE AND BELIEF, THE FOREGOING IS A TRUE AND CORRECT RECORD OF THE ABOVE DESCRIBED HOLE AND THAT HE OR SHE WILL FILE THIS WELL RECORD WITH THE STATE ENGINEER AND THE PERMIT HOLDER WITHIN 20 DAYS AFTER COMPLETION OF WELL DRILLING:	
	 _____ SIGNATURE OF DRILLER	 _____ DATE

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WELL RECORD & LOG (Version 6/9/08)

FILE NUMBER	POD NUMBER	TRN NUMBER
LOCATION		PAGE 2 OF 2



WELL RECORD & LOG

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1. GENERAL AND WELL LOCATION	POD NUMBER (WELL NUMBER) BOB DURHAM MW -29				OSE FILE NUMBER(S)											
	WELL OWNER NAME(S) PLAINS MARKETING LP				PHONE (OPTIONAL)											
	WELL OWNER MAILING ADDRESS 333 CLAY STREET, SUITE 1600				CITY HOUSTON		STATE TX		ZIP 77078							
	WELL LOCATION (FROM GPS)	DEGREES LATITUDE 32		MINUTES 37		SECONDS 25.00 N		* ACCURACY REQUIRED: ONE TENTH OF A SECOND * DATUM REQUIRED: WGS 84								
		LONGITUDE 103		16		49.00 W										
DESCRIPTION RELATING WELL LOCATION TO STREET ADDRESS AND COMMON LANDMARKS GO MONUMENT CAFE GO W 9THS OF MI TAKE L INTO SITE.																
2. OPTIONAL	(2.5 ACRE) 1/4		(10 ACRE) 1/4		(40 ACRE) 1/4		(160 ACRE) 1/4		SECTION		TOWNSHIP <input type="checkbox"/> NORTH <input type="checkbox"/> SOUTH		RANGE <input type="checkbox"/> EAST <input type="checkbox"/> WEST			
	SUBDIVISION NAME				LOT NUMBER				BLOCK NUMBER				UNIT/TRACT			
	HYDROGRAPHIC SURVEY								MAP NUMBER				TRACT NUMBER			
3. DRILLING INFORMATION	LICENSE NUMBER WD1478		NAME OF LICENSED DRILLER EDWARD BRYAN						NAME OF WELL DRILLING COMPANY STRAUB CORPORATION							
	DRILLING STARTED 5-28-10		DRILLING ENDED 5-28-10		DEPTH OF COMPLETED WELL (FT) 25		BORE HOLE DEPTH (FT) 25		DEPTH WATER FIRST ENCOUNTERED (FT)							
	COMPLETED WELL IS: <input type="checkbox"/> ARTESIAN <input type="checkbox"/> DRY HOLE <input type="checkbox"/> SHALLOW (UNCONFINED)								STATIC WATER LEVEL IN COMPLETED WELL (FT)							
	DRILLING FLUID: <input type="checkbox"/> AIR <input type="checkbox"/> MUD <input type="checkbox"/> ADDITIVES - SPECIFY:															
	DRILLING METHOD: <input type="checkbox"/> ROTARY <input type="checkbox"/> HAMMER <input type="checkbox"/> CABLE TOOL <input type="checkbox"/> OTHER - SPECIFY:															
	DEPTH (FT)		BORE HOLE DIA. (IN)		CASING MATERIAL		CONNECTION TYPE (CASING)		INSIDE DIA. CASING (IN)		CASING WALL THICKNESS (IN)		SLOT SIZE (IN)			
	FROM	TO														
4. WATER BEARING STRATA	DEPTH (FT)		THICKNESS (FT)		FORMATION DESCRIPTION OF PRINCIPAL WATER-BEARING STRATA (INCLUDE WATER-BEARING CAVITIES OR FRACTURE ZONES)						YIELD (GPM)					
	FROM	TO														
METHOD USED TO ESTIMATE YIELD OF WATER-BEARING STRATA								TOTAL ESTIMATED WELL YIELD (GPM)								

FOR OSE INTERNAL USE



WELL RECORD & LOG (Version 6/9/08)

FILE NUMBER		POD NUMBER		TRN NUMBER	
LOCATION				PAGE 1 OF 2	

5. SEAL AND PUMP	TYPE OF PUMP: <input type="checkbox"/> SUBMERSIBLE <input type="checkbox"/> JET <input type="checkbox"/> NO PUMP - WELL NOT EQUIPPED <input type="checkbox"/> TURBINE <input type="checkbox"/> CYLINDER <input type="checkbox"/> OTHER - SPECIFY:						
	ANNULAR SEAL AND GRAVEL PACK	DEPTH (FT)		BORE HOLE DIA. (IN)	MATERIAL TYPE AND SIZE	AMOUNT (CUBIC FT)	METHOD OF PLACEMENT
		FROM	TO				
		2	25				
		0	2				

6. GEOLOGIC LOG OF WELL	DEPTH (FT)		THICKNESS (FT)	COLOR AND TYPE OF MATERIAL ENCOUNTERED (INCLUDE WATER-BEARING CAVITIES OR FRACTURE ZONES)	WATER BEARING?
	FROM	TO			
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
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					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
	ATTACH ADDITIONAL PAGES AS NEEDED TO FULLY DESCRIBE THE GEOLOGIC LOG OF THE WELL				

7. TEST & ADDITIONAL INFO	WELL TEST	METHOD: <input type="checkbox"/> BAILER <input type="checkbox"/> PUMP <input type="checkbox"/> AIR LIFT <input type="checkbox"/> OTHER - SPECIFY:	
		TEST RESULTS - ATTACH A COPY OF DATA COLLECTED DURING WELL TESTING, INCLUDING START TIME, END TIME, AND A TABLE SHOWING DISCHARGE AND DRAWDOWN OVER THE TESTING PERIOD.	
	ADDITIONAL STATEMENTS OR EXPLANATIONS: PLUGGING REPORT ALL CASING LEFT IN HOLE.		

8. SIGNATURE	THE UNDERSIGNED HEREBY CERTIFIES THAT, TO THE BEST OF HIS OR HER KNOWLEDGE AND BELIEF, THE FOREGOING IS A TRUE AND CORRECT RECORD OF THE ABOVE DESCRIBED HOLE AND THAT HE OR SHE WILL FILE THIS WELL RECORD WITH THE STATE ENGINEER AND THE PERMIT HOLDER WITHIN 20 DAYS AFTER COMPLETION OF WELL DRILLING:	
	 _____ SIGNATURE OF DRILLER	 _____ DATE

FOR OSE INTERNAL USE

WELL RECORD & LOG (Version 6/9/08)

FILE NUMBER	POD NUMBER	TRN NUMBER
LOCATION		PAGE 2 OF 2